

**BIRTH CERTIFICATE  
CHOICE:  
COMPLETE OR  
INCOMPLETE?**

If you had the following situation occur in your birth registry, which solution would you choose...?

(1) An unmarried mother in your birthing hospital wants to create the birth record with the biological father listed on the record. She provides the father's legal and confidential information. You create the *Voluntary Acknowledgment of Parentage* and the birth certificate listing the father's information. The mother completes her portion of the *Voluntary Acknowledgment*, and she assures you that the father will come in the next day to sign his part of the form. The father does not keep his appointment. Repeated telephone calls produce no results. How should this record be completed?

(2) Another variation: biological father lives in another state or country. Mother requests that the *Voluntary Acknowledgment of Parentage* be mailed to the father. However, the form has not been returned by the father. How should you process this record?

The answer to these situations is the same. If the *Acknowledgment* cannot be completed within the 10-day statutory period (plus a reasonable extension in certain cases), the record should be completed as a single parent certificate. Adding father information can be done in the future using a post birth *Acknowledgment* form in the City or Town Clerk's office.

Creating a complete birth certificate for a newborn at the birthing hospital must be the main focus of the birth registry.

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Information

Booth

**POLICY REVISION:  
INFORMANT SIGNATURE  
ITEM 17A BIRTH CERTIFICATE**

The *Standard Certificate of Live Birth* requires an informant signature to be completed in item 17A. The signature is necessary to validate the accuracy of the information recorded on the legal portion of the birth certificate, and it is a requirement for legal registration of the record. In most cases obtaining the appropriate signature is straightforward. However, in an increasing percentage of cases, the birth certificate can remain unsigned for over 365 days. If this happens, a *Delayed Record of Birth* must be created. This type of birth record can cause the newborn problems with his or her birth certificate, usually by requiring additional proof of identity.

The Registry of Vital Records and Statistics has revised the rules for informant signature. This revision is directed toward allowing greater flexibility in obtaining appropriate signatures, ultimately resulting in a greater percentage of legally recorded records. A full discussion of changes to the Informant Signature policy is included as an attachment to this *EBC Newsletter*.

The following is a summary of the revised signature procedure.  
(Continued on next page)

## INFORMANT SIGNATURE (Cont.)

### RECOMMENDATIONS FOR COMMON SITUATIONS:

Parents married: Last names of  
mother, father, child are the same.

Preferred order of informant:

1. Mother or parents.
2. Father.
3. Hospital administrator/manager of  
the birth registration unit.

Parents married: Last names of  
mother, father, child NOT the same.

Preferred order of informant:

1. Parents.
2. Mother.
3. Father.
4. Hospital administrator/manager of  
the birth registration unit.

Mother not married: Last name of  
mother, child are the same:

Preferred order of informant:

1. Mother.
2. Hospital administrator/manager of  
the birth registration unit.

Parents Not Married/ Acknowledgment  
of Parentage (and Affidavit of Non-  
Paternity), if appropriate.

Preferred order of informant:

1. Parents.
2. Mother.
3. Father.
4. Hospital administrator/manager of  
the birth registration unit.

Note: NO SSN request should be  
submitted for the newborn if parent(s)  
are not informant.

### Illegible, non-Roman, or questionable signatures:

Basic rule: verify the names on the  
birth record. Clarify the signature by  
using a notation in the margin of the  
birth certificate stating "Witnessed By"  
with the name and title of the preparer.

### Possible "Other" Informants – Check with the Registry

Director of Medical Records  
Nurse/Manager of Maternity Unit  
Hospital CEO



## FACILITY NAME CHANGE: HALE HOSPITAL (2131) TO MERRIMACK VALLEY HOSPITAL

The name of Hale Hospital (facility code 2131) in Haverhill, Massachusetts has changed to Merrimack Valley Hospital. This name change should be made in EBC so that the hospital name is accurate. Although Hale Hospital (now Merrimack Valley Hospital) closed as a birthing facility in July 2001, the current name should be maintained in the EBC database to accurately identify the facility in the event of an unexpected birth.

From the main Registration screen in EBC, enter <F5>, Library Maintenance.



From Library Maintenance, enter <F4> - Facility File Maintenance. The main facility screen will appear.



To update an existing screen, enter <F1> Get. Enter <2131> under Facility Code and Hale Hospital information will appear. Enter <F3> Update mode. Enter down to Facility name, delete Hale Hospital, and enter "Merrimack Valley Hospital" as shown on the next screen. The remainder of the information remains the same. Press <RTN> through the remaining fields to exit from update mode.



Press <ESC> twice to return to the main EBC Registration screen.